

Child protection research briefing

Child neglect

October 2007

Summary

Neglect is a serious form of maltreatment. It is the persistent failure to meet a child's basic physical and/or psychological needs resulting in serious impairment of health and/or development (Turney & Tanner 2005). Neglect has harmful consequences in the short and long term and it can be fatal. In practice, neglect exists as a continuum ranging from reactive and short term to chronic and severe neglect (ibid.). Although relatively little attention has been paid to neglect in terms of research and policy, existing research challenges the common misconception that neglect is not as serious as other forms of child maltreatment.

Neglect is a complex phenomenon that is difficult to define. In the face of pluralistic notions of what constitutes adequate care, defining children's needs and determining what constitutes neglect has been problematic. The lack of clarity around what child neglect means and includes has practical implications. As most neglectful families have complex needs, interventions frequently entail responses from different service providers. Practitioners' understandings of neglect, however, are often shaped by different professional backgrounds and can vary within and across different services. This can contribute to vital pieces of information in neglect cases not being picked up, information being lost or not being effectively communicated across different agencies. An effective interagency approach is indispensable for successfully intervening in cases of child neglect and in safeguarding children.

Key findings

- Neglect has been neglected. It is underreported and underestimated.
- Neglect is pervasive. It is the most common category in the child protection registry in England, accounting for 43 per cent of all entries (DfES 2006a).

- Neglect is complex and hard to define. It varies by type, severity and chronicity as well as a child's age.
- Because neglect is hard to define, it can be difficult for professionals to identify the point at which to make a referral.
- Neglect often co-exists with other forms of child maltreatment. Boundaries between abuse and neglect can become blurred.
- There is no single cause for neglect. Most neglectful families experience a variety and a combination of adversities. Depression, domestic violence, substance use and poverty are amongst the factors linked to neglect.
- Some children are particularly vulnerable to neglect. At risk groups include children born prematurely, children with disabilities, adolescents, children in care, runaways, asylum-seeking children and children from BME communities.
- Neglect has adverse short- and long-term effects. In extreme cases, neglect kills.
- The needs of neglectful families are varied and complex. This calls for a joined-up interagency approach.
- Effective interventions in child neglect cases are crucial for safeguarding children.

Background

Neglect has received little attention until relatively recently. Neglect has been described as the “most serious type of child maltreatment and the least understood” (Crittenden 1999: 67). It is the most common reason for inclusion on the child protection register in the UK. In the year ending 31st March 2006, 43 per cent of child protection registrations in England related to children considered to be at risk of neglect (DfES, 2006a).

What is neglect?

Neglect is notoriously difficult to define as there are no clear, cross-cultural standards for desirable or minimally adequate child rearing practices (Gaudin 1999). Research shows that neglect often co-exists with other forms of abuse and adversity (Daniel 2005; Claussen & Cicchetti 1991). While neglect generally refers to the absence of parental care and the chronic failure to meet children’s basic needs, defining those needs has not been straightforward. “Working Together” (DfES, 2006b) defines neglect as:

“..the persistent failure to meet a child’s basic physical and/or psychological needs, likely to result in the serious impairment of the child’s health or development. Neglect may occur during pregnancy as a result of maternal substance abuse. Once a child is born, neglect may involve a parent or carer failing to provide adequate food, clothing and shelter (including exclusion from home or abandonment); protect a child from physical and emotional harm or danger; ensure adequate supervision (including the use of inadequate care-givers); or ensure access to appropriate medical care or treatment. It may also include neglect of, or unresponsiveness to, a child’s basic emotional needs.”

The NSPCC study on child maltreatment in the UK examined the prevalence of neglect by focusing on the core issues of basic physical nurturing, healthcare and supervision. 6

per cent of children were found to have experienced serious absence of care¹ (Cawson et al 2000). According to Dubowitz et al (1993), experiences of neglect are located within a continuum of mild and episodic to severe and chronic physical neglect and emotional abuse. Although chronic and long-term neglect may differ from a short period of transitory acute neglect, either can endanger or kill a child (Reder et al 1993; Virginia Child Protection Newsletter 1998). An increasingly sophisticated understanding of neglect is revealing less obvious forms of neglect, such as depriving children of adequate stimulation, protective discipline or reliable health care. Equally, there is an increasing recognition that emotional neglect can occur even when physical needs are met whereas physical neglect always has some emotional impact on the child (Minty 2005). This understanding challenges traditional assumptions that a child can be “dirty but happy”.

With the growing importance accorded to children’s psychological needs, a clear-cut distinction between emotional “neglect” and emotional “abuse” can seem artificial. This is reflected in the term “emotional maltreatment” used in this briefing to encompass both emotional neglect and abuse.

Causes of neglect

The causes of neglect are complex and can be attributed to three different levels; an intra-personal, an inter-personal/family and a social/ecological level (Turney & Tanner 2005). Although the causes of neglect are varied, studies suggest that, amongst other things, parental mental health problems, substance use (Stone, 1998; Cleaver et al, 1999), domestic violence (Shepard & Raschick 1999; Cawson 2002), unemployment (Creighton 1992 cited in Minty & Pattinson 1994), and poverty (Thoburn et al 2000) are factors which increase the likelihood of neglect. Neglectful families often experience a variety or a combination of adverse factors.

¹ This included frequently going hungry; frequently going to school in dirty clothes; not being taken to the doctor when ill, all under the age of 12; regularly having to look after themselves because their parents went away, or had problems such as with drugs or alcohol; being abandoned and deserted; or living in a home with dangerous physical conditions. Other measures included having to do their own laundry under the age of 12; living in a dirty home; and absence of dental health care.

At the intra-personal level, the discussion around neglectful parent's characteristics primarily focuses on mothers, reflecting traditional notions of women as carers (Turney & Tanner 2005; Scourfield 2003). "Neglectful attributes" have included an inability to plan, lack of confidence about the future, difficulty with managing money, emotional immaturity, lack of knowledge of children's needs, a large number of children, being a teenage mother, high levels of stress and poor socioeconomic circumstances (Coohey 1995; Giovanni and Becerra 1979; Mayall & Norgard 1983; Polansky et al 1981; Thompson 1995). Mental health problems, particularly depression, have been linked with a parent's inability to meet a child's needs (Minty 2005). Likewise, substance misuse is believed to play a crucial role in undermining a parent's ability to cope with parental responsibilities. While the literature largely focuses on mothers, the role of fathers in neglect as well as the impact of their absence remains largely unexplored. There is still little known about whether mothers and fathers neglect differently and how this affects children. Similarly, not much is known about whether girls and boys experience neglect differently. More research in this area and a gendered analysis of neglect would be useful.

At the inter-personal/family level, a significant number of neglectful families are headed by a lone mother or have a transient male (Stevenson 1998). Unstable and abusive relationships have also been mentioned as increasing the risk of child neglect. The impact of living with domestic violence on children frequently includes either direct violence or forced witnessing of abuse, which is potentially very damaging to children (Radford & Hester, 2006). While the Department of Health (2000) connects children's exposure to domestic violence to parents' failure to protect them from emotional harm, the notion of "failure to protect" has been challenged as it focuses primarily on the responsibility of the abused parent, usually the mother, who is often herself at significant risk (Hester et al, 2006). A recent reform to the Domestic Violence, Crime and Victims Act (2004) has introduced a new offence of causing or allowing the death of a child or vulnerable adult, thus reinforcing the notion of "failure to protect". Research on domestic violence, however, has consistently shown that supporting the non-abusive parent is good child protection. There is some indication of the cyclical and inter-generational nature of neglect. A study on childhood abuse and later sensitivity to a child's emotions showed that mothers with a self-reported history of physical abuse had higher indications of insensitivity and lack of attunement to infants' emotional cues than mothers with no history of abuse (Casanova et al 1994). Although the literature suggests that neglectful

parents may have been affected adversely by their own past experiences (Harmer et al 1999), more research is needed to explore the link between past experiences of maltreatment and neglectful parenting behaviours.

At the social/ecological level, the association between poverty and neglect has frequently been made. The NSPCC maltreatment study supports the association between neglect and lower socio-economic class (Cawson, 2002). US studies have shown that less affluent families are more likely to be found to maltreat their children, particularly in the form of neglect and physical abuse, than affluent families (Wolock & Horowitz 1979; Sedlak & Broadhurst 1996). Some argue that many forms of physical neglect, such as inadequate clothing, exposure to environmental hazards and poor hygiene may be directly attributed to poverty (Dubowitz 1994) whereas others are more cautious in making a direct link (Minty & Pattinson 1994). While poverty is believed to increase the likelihood of neglect, it is important to highlight that poverty does not predetermine neglect (McSherry 2004). Many low-income families are not neglectful but provide loving homes for their children. However, when poverty coexists with other forms of adversity, it can negatively impact parent's ability to cope with stressors and undermine their capacity to adequately respond to their child's needs. McSherry (2004) argues that the relationship between child neglect and poverty should be seen as circular and interdependent.

Children particularly vulnerable to neglect

Some children are especially vulnerable to neglect. Amongst them are children born prematurely or with very low birth weight, children with disabilities, adolescents, runaways, children in care, asylum seeking children, refugee children, and children from black and minority ethnic communities. In this briefing, adolescents, children with disabilities, and children from BME communities are discussed as particularly at risk groups.

Neglected adolescents

Child maltreatment and specifically neglect is often viewed as something that affects young children. While research has shown that pre-school children are at the highest risk of being seriously and fatally injured (UN 2006), there are as many entries concerning 10

to 15-year-olds in the Child Protection Register in England as there are concerning 1 to 4-year-olds and 5 to 9-year-olds (DfES 2005). The NSPCC prevalence study on child maltreatment found that 20 per cent of young adults in the UK reported having experienced inadequate supervision as children, including being allowed out overnight without parents knowing their whereabouts as a teenager (Cawson et al 2000). Sedlak (1997) further found evidence of increased risk of physical neglect amongst older teenagers. UK research found that a quarter of young people who run away from home were forced to leave home by their parents (Rees & Siakeu 2004), that some long-term runaways have been rejected or abandoned by their parents (Smeaton 2005), and that young runaways more than other teenagers feel that their parents don't care about them (Safe on the Streets Research Team 1999). Macaskill (2006) recently argued that statutory assessments of child protection concerns should give more credence to teenagers' perception of what it means to be "at risk". In her study on young runaways, young people reported that their parents presented professionals with a picture of reduced risk in contrast to their own description of enhanced risk (ibid). While the specific issues around young people and neglect in the UK context are still under-researched, adolescent maltreatment has received more attention in other countries, particularly in the US and Canada. The international literature suggests that maltreatment of adolescents is somewhat different from that of younger children. There may be different conceptual issues, different trends in maltreatment amongst different age groups, different effects of maltreatment and a need for different interventions (Giovannoni 1989; Garbarino 1989; Janus et al 1995). The NSPCC is currently carrying out research on young people and neglect in cooperation with the Children's Society and the University of York.

Children with disabilities

The neglect of children with disabilities has been largely invisible. The research that does exist indicates that disabled children are more vulnerable to maltreatment than non-disabled children (National Working Group on Child Protection and Disability 2003). Sullivan and Knutson's (1998) US study of a hospital-based sample of children with a range of disabilities found that disabled children were 3.8 times more likely to be neglected than non-disabled children. Reasons for this are varied and complex. On the one hand, children with disabilities might be less able to communicate their needs and to

access help outside their families or care settings. On the other hand, the needs of children with disabilities are often demanding and may overstretch a family's capacity to provide adequate care (Kennedy & Wonnacott 2005). A Spanish study of 62 disabled children found that neglect was the most common form of maltreatment experienced by disabled children with 82.2 per cent of the cases suffering from physical neglect (Gonzalvo 2002). In the UK, however, Cooke's (2000) study of children under child protection procedures shows that neglect was the registration category used the least often for disabled children. This contrasts with government statistics that show neglect to be the largest category of child maltreatment (DfES 2006). It is evident that the neglect of disabled children is not sufficiently recognised and needs to be further investigated.

Neglect and cultural and ethnic diversity

The myth that child maltreatment is particularly prevalent in BME communities can be attributed to high profile child tragedies involving black children such as Jasmine Beckford, Tyra Henry and Victoria Climbié (London Borough of Brent 1985; Lord Laming 2003; Newham Area Child Protection Committee 2002). Research suggests a high representation of children from minority ethnic communities in child protection services (Barn et al 2006). However, this does not necessarily show that ethnic minority families neglect or maltreat their children more than other families; it merely indicates that minority ethnic children are more likely to be *registered* for child protection concerns. In a recent study on parenting in multi-ethnic Britain, Barn et al found little evidence, for instance, of minority ethnic families holding more punitive attitudes towards child rearing than white families in Britain. Less than two-fifths of the minority ethnic parents reported that they had used physical punishment, mostly occasionally, in disciplining their children (ibid). Barn et al, however, also suggest that low income, lack of financial resources, unemployment, poor and overcrowded housing and reliance on social housing are common problems and often lead to difficult situations for many black, Pakistani and Bangladeshi families. These are factors that may put children at an increased risk of neglect. Barn et al note a demarcation between public and private concerns in different ethnic groups. Some ethnic groups felt able to raise concerns about issues like poor housing and lack of finances whereas they were less likely to vocalise problems with their children's behaviour to outsiders (ibid). Similarly, Macaskill's (2006)

found that some ethnic minority parents, particularly recent immigrants, did not access services when there were problems at home because they felt Britain was “too liberal” even though there was little evidence of professionals being culturally insensitive. Her study on young runaways showed that three-quarters of young people admitted to a London refuge during the four-month period under study came from minority ethnic backgrounds.

While Macaskill’s study found little evidence of racism amongst practitioners, recent enquiries into the deaths of black children raised some concerns. The inquiry into the death of Tyra Henry concluded that the white social workers from Lambeth council were too trusting of the family, making assumptions about the extended family because they were black (The Guardian 2003). Lord Laming’s investigation of the death of Victoria Climbié states that

“Victoria was a black child murdered by her two black carers. Many of the professionals with whom she came into contact during her life in this country were black. Therefore it is tempting to conclude that racism can have no part to play in her case. But such a conclusion fails to recognise that racism finds expression in many other ways other than in direct application of prejudice (2003: 345).”

This highlights the need to gain a better understanding of how cultural factors shape the way children experience neglect and maltreatment. In this context, it is important to recognise the enormous diversity that exists within the “BME category”, consisting of a plethora of cultural norms and practices, historical narratives, family dynamics and belief systems within and across different communities. As Barn et al (2006) point out; the heterogeneity of minority ethnic family life is complex and needs to be understood in the context of migration, ethnicity, socio-economic circumstances, multiculturalism, and racism. A better understanding of this is crucial for devising adequate, culturally relevant practice responses. Currently, the provision for children from BME communities experiencing neglect is hampered by a lack of resources. Language and communication present key barriers. Practitioners are at a disadvantage when clients have a poor command of English. Nevertheless, social workers have a responsibility to ensure that unfamiliar terms such as “child protection”, “child abuse” and “neglect” are explained

without causing the service user further anxiety. Failure to do this will increase the vulnerability of ethnic minority children to neglect.

Effects of neglect on children's development

Research focusing specifically on the effects of neglect is still very limited in comparison to other areas of child maltreatment, most notably child sexual abuse. As neglect often co-exists with other forms of maltreatment, what we know about the effects of neglect is primarily derived from studies that examine neglect in conjunction with other forms of abuse. Chronic and severe forms of neglect pose a serious threat to a child's survival. Apart from being potentially fatal, neglect causes great distress to children and is believed to lead to poor outcomes in the short- and long-term. Possible consequences include an array of health and mental health problems, difficulties in forming attachment and relationships, lower educational achievements, an increased risk of substance misuse, higher risk of experiencing abuse as well as difficulties in assuming parenting responsibilities later on in life (Taylor & Bridge 2005). Glaser's (2000) review of work carried out in the fields of neuro-biology and developmental psychology showed that emotional neglect can have adverse effects on the development of a child's brain. A longitudinal study on children whose mothers were neglectful and emotionally unavailable indicated that children grew up to be socially withdrawn, inattentive and cognitively underachieving in their elementary-school years (Erickson & Egeland 1996). Another study carried out in Romania on 25 children aged between 23 and 50 months showed that being raised in an orphanage seriously delayed their cognitive and social functioning (Kaler & Freeman 1994). While knowledge of the effects of neglect is still patchy at best, maltreatment is believed to produce varied outcomes. Much of how maltreatment affects children during their childhood and later in adulthood depends on the type, severity, frequency of the maltreatment and on what support mechanisms and coping strategies were available to the child. It is therefore likely that research on the effects of neglect would generate a similar multitude of outcomes. More research in this area would be beneficial for devising adequate support services to help address the adverse short- and long-term effects of neglect.

Practice implications

While definitions of neglect have become increasingly comprehensive and sophisticated, applying the concept of neglect to practice remains challenging. Research shows that practitioners frequently have different understandings of what constitutes neglect and find it difficult to decide at what point a referral should be made (Howarth 2005). Neglect is a notoriously complex and depressing issue to deal with, which can leave practitioners feeling overwhelmed by the enormity and plurality of the needs of neglectful families. Because these needs are often varied and interconnected, an effective inter-agency response is crucial. Lord Laming's report (2003) gives evidence to an insufficiently joined-up approach in service provision and to a system failing to recognise and effectively intervene in serious cases of child neglect with catastrophic consequences. Although these extreme cases do not represent a failure of the system *per se*, they raise pertinent questions with regard to how cases of child neglect are picked up. Developing effective interventions and services is vital in order to support neglectful parents in meeting their children's needs. In the event that such family-oriented interventions should fail, the best interest and welfare of the child should be paramount in deciding on care provisions of the neglected child.

Policy recommendations

- The NSPCC believes the law should be amended to incorporate a 'positive duty of care' on parents in England and Wales to promote the welfare of their children. Parents in England and Wales can be subject to criminal and civil proceedings if they harm or neglect a child, but there is no expectation that they will actively promote children's well-being. In Scotland, a positive duty of care is enshrined in the Children (Scotland) Act 1995.
- More and better training is needed to assist professionals in making appropriate use of core assessments and the common assessment framework (CAF) to support neglected children and to ensure appropriate decisions are made about when to intervene and under which section of the Children Act (2004).

- Service responses should focus on the rights of the child (OHCHR, 1998).
- Professional definitions of neglect need to be clarified. Neglect can be a chronic as well as an acute situation and is therefore particularly difficult for professionals to deal with as an incident.
- Improving the context of children's and families' lives, for instance in relation to housing, good quality childcare, the benefits system and specialist substance misuse, mental health and domestic violence services, have the potential to reduce the likelihood of children being neglected. For more detail, see NSPCC policies on Poverty and Parental Substance Misuse, available on the NSPCC inform website (www.nspcc.org.uk/inform)
- A public education campaign is needed to raise awareness of the extent and serious consequences of neglect and the importance of reporting it to the appropriate agencies.

References

- Barns, R, Ladino, C & Rogers, B (2006) Parenting in multi-racial Britain. *Parenting in Practice* London: National Children's Bureau Foundation.
- Casanova, G, Domanic, J, McCanne, T & Milner, J (1994) Physiological Responses to Child Stimuli in Mothers with and without a Childhood History of Physical Abuse. *Child Abuse and Neglect* 18: 995-1004.
- Cawson, P, Wattam, C, Brooker, S & Kelly, G (2000) *Child Maltreatment in the United Kingdom: A Study of the Prevalence of Child Abuse and Neglect*. London: National Society for the Prevention of Cruelty to Children.
- Cawson P (2002) *Child Maltreatment in the Family: The experience of a national sample of young people*. London: National Society for the Prevention of Cruelty to Children.
- Coohy, C (1995) Neglectful Mothers, Their Mothers, and Partners: The Significance of Mutual Aid. *Child Abuse and Neglect* 19 (8): 885-895.
- Claussen, A & Cicchetti, P (1991) Physical and Psychological Maltreatment: Relations among Types of Maltreatment. *Child Abuse and Neglect* 15: 5-18.
- Cleaver H, Unell I & Aldgate J (1999) *Children's Needs - Parental Capacity: The Impact of Parental Mental Illness, Problem Alcohol and Drug Use, and Domestic Violence on Children's Development*. London: The Stationery Office.
- Crittenden, P. (1999) Child Neglect: Causes and Contributions. In H. Dubowitz (ed) (1999) *Neglected Children: Research, Practice and Policy*. Thousand Oaks: Sage.
- Daniel, B (2005) Introduction to Issues for Health and Social Care in Neglect. In J Taylor & B Daniel (eds) *Child Neglect: Practice Issues for Health and Social Care* (11-25). London & Philadelphia: Jessica Kingsley Publishers.
- Department for Education and Skills (2005) *Statistics of Education. Referrals, Assessments and Children and Young People on the Child Protection Registers: Year Ending 31 March 2004*. National Statistics: DfES.
- Department for Education and Skills (2006a) *Statistics of Education. Referrals, Assessments and Children and Young People on the Child Protection Registers, England: Year Ending 31 March 2006 (Final)*. National Statistics: DfES.
- Department for Education and Skills (2006b) *Working Together to Safeguard Children: a guide to inter-agency working to safeguard and promote the welfare of children*. London: DfES.
- Department of Health (1995) *Child Protection: Messages from Research*. London: HMSO.
- Department of Health (2000) *Framework for the Assessment of Children in Need and their Families*. London: The Stationary Office.
- Dubowitz, H (1994) Neglecting the neglect of neglect. *Journal of Interpersonal Violence* 9 (4): 556-560.

- Dubowitz, H (ed) (1999) *Neglected Children: Research, Practice and Policy*. Thousand Oaks: Sage.
- Dubowitz, H, Pitts, S C & Black M M (2004) Measurement of Three Subtypes of Child Neglect. *Child Maltreatment* 9 (4): 344-356.
- Erickson, M & Egeland, B (1996) Child Neglect. In J Briere, L Berliner, J Bulkley, C Jenny & T Reid (eds) *The APSAC Handbook on Child Maltreatment (4-20)*. Thousand Oaks, CA: Sage.
- Garbarino J (1989) Troubled youth, troubled families: the dynamics of adolescent maltreatment in D Cichetti & V Carlson (eds) *Child Maltreatment: Theory and Research on the Causes and Consequences of Child Abuse and Neglect*. Cambridge: Cambridge University Press.
- Gaudin, J M (1999) Child Neglect: Short-term and Long-term Outcomes. In H Dubowitz (ed) *Neglected Children: Research, Practice and Policy*. Thousand Oaks: Sage.
- Glaser, D (2000) Child Abuse and Neglect and the Brain – A Review. *Journal of Child Psychology and Psychiatry and Allied Disciplines* 41 (1): 97-116.
- Giovanni, J M & Becerra, R M (1979) *Defining Child Abuse*. New York: The Free Press.
- Giovannoni (1989) Definitional issues in child maltreatment in D Cichetti & V Carlson (eds) *Child Maltreatment: Theory and Research on the Causes and Consequences of Child Abuse and Neglect*. Cambridge: Cambridge University Press.
- Gonzalvo, G (2002) Maltreatment of Children with Disabilities: Characteristics and Risk Factors. *Anales Españoles de Pediatría* 56 (3): 219-223.
- Harmer, A, Sanderson, J & Mertin, P (1999) Influence of Negative Childhood Experiences on Psychological Functioning, Social Support, and Parenting for Mothers Recovering from Addiction. *Child Abuse and Neglect* 23: 421-433.
- Hester, M, Pearson, C & Harwin, N Abrahams, H. (2006) *Making an Impact: Children and Domestic Violence - a Reader*. London: Jessica Kingsley.
- Horwath, J (2005) Is This Child Neglect? The Influence of Differences in Perceptions of Child Neglect on Social Work Practice. In J Taylor & B Daniel (eds) *Child Neglect: Practice Issues for Health and Social Care (73-96)*. London & Philadelphia: Jessica Kingsley Publishers.
- Janus M, Archambault F, Brown S & Welsh L (1995) Physical Abuse in Canadian Runaway Adolescents. *Child Abuse & Neglect* 19(4): 433-447.
- Kaler, S & Freeman, B (1994) Analysis of Environmental Deprivation: Cognitive and Social Development in Romanian Orphans. *Journal of Child Psychology and Psychiatry* 35: 769-781.
- Kennedy, M & Wonnacott, J (2005) Neglect of Disabled Children. In J Taylor & B Daniel (eds) *Child Neglect: Practice Issues for Health and Social Care (228-248)*. London & Philadelphia: Jessica Kingsley Publishers.

- London Borough of Brent (1985) *A Child in Trust: Report of the Panel of Inquiry into the Circumstances Surrounding the Death of Jasmine Beckford*. London: Borough of Brent.
- Lord Laming (2003) *The Victoria Climbié Inquiry*. London: HMSO.
- Mayall, P D & Norgard, K E (1983) *Child Abuse and Neglect: Sharing Responsibility*. Chichester: John Wiley and Sons.
- McSherry D (2004) Which Came First, the Chicken or the Egg? Examining the Relationship between Child Neglect and Poverty. *British Journal of Social Work* 34: 727-733.
- Minty, B & Pattinson, G (1994) The Nature of Child Neglect. *British Journal of Social Work* 24(6): 733-747.
- Minty, B (2005) The Nature of Emotional Child Neglect and Abuse. In J Taylor & B Daniel (eds) *Child Neglect: Practice Issues for Health and Social Care (57-72)*. London & Philadelphia: Jessica Kingsley Publishers.
- National Working Group on Child Protection and Disability (2003) *"It doesn't happen to disabled children": child protection and disabled children*. London: NSPCC.
- Newham Area Child Protection Committee (2002) *Ainlee: Chapter 8 Review*. London: Newham Area Child Protection Committee.
- OHCHR (1998) *Convention on the Rights of the Child*. Geneva: Office of the United Nations High Commissioner for Human Rights.
- Polansky, N A, Chalmers, M A, Bittenwieser, E & Williams D P (1981) *Damaged Parents: An Anatomy of Child Neglect*. Chicago, IL: The University of Chicago Press.
- Taylor, J & Daniel, B (eds) (2005) *Child Neglect: Practice Issues for Health and Social Care*. London & Philadelphia: Jessica Kingsley Publishers.
- Turney, D & Tanner, K (2005). Understanding and Working with Neglect. *Research in Practice: Every Child Matters Research Briefings* 10: 1-8.
- Radford, L & Hester, M (2006). *Mothering Through Domestic Violence*. London: Jessica Kingsley.
- Reder, P, Duncan, S & Gray, M. (1993) *Beyond Blame: Child Abuse Tragedies Revisited*. London: Routledge.
- Rees G & Siakeu J (2004) *Thrown Away: The Experiences of Young People Forced to Leave Home*. London: The Children's Society.
- Safe on the Streets Research Team (1999) *Still Running: Children on the Streets in the UK*. London: The Children's Society.
- Scottish Executive (2000) *Protecting Children – A Shared Responsibility: Guidance for Health Professionals in Scotland*. Edinburgh: The Scottish Executive.
- Scourfield, J (2003) *Gender and Child Protection*. Houndsmills: Palgrave MacMillan.

Sedlak A J (1997) Risk Factors for the Occurrence of Child Abuse and Neglect. *Journal of Aggression Maltreatment and Trauma* 1:149-187.

Sedlak, A J & Broadhurst, D D (1996) *Executive Summary of the Third National Incidence Study of Child Abuse and Neglect*. Washington, DC: National Centre on Child Abuse and Neglect, HHS.

Shepard M & Raschick M (1999) How Child Welfare Workers Assess and Intervene around Issues of Domestic Violence. *Child Maltreatment* 4:148-156.

Smeaton E (2005) *Living on the Edge: The Experiences of Detached Young Runaways*. London: The Children's Society.

Stevenson, O (1998) *Neglected Children: Issues and Dilemmas*. Oxford: Blackwell.

Stone B (1998) Child neglect: practitioners' perspectives. *Child Abuse Review* 7(2): 87-96.

Sullivan, P M & Knutson J F (1998) The Association Between Child Maltreatment and Disabilities in a hospital-based Epidemiological Study. *Child Abuse and Neglect* 22: 271-288.

Sullivan, P M & McGrath, M (2003) Perinatal Morbidity, Mild Motor Delay, and Later School Outcomes. *Developmental Medicine and Child Neurology* 45:104-112.

The Bridge Foundation (1995) *Paul: Death through Neglect*. London: Islington Area Child Protection Committee.

The Guardian (2003) Catalogue of Cruelty. *Society Guardian* 27 January 2003

Thoburn, J, Wilding, J & Watson, J (2000) *Family Support in Cases of Emotional Maltreatment and Neglect*. London: The Stationary Office.

Thompson, R A (1995) *Preventing Child Maltreatment Through Social Support*. Thousand Oaks, CA; London; New Delhi: Sage.

UN (2006) *The United Nations Secretary General's Study on Violence against Children*. <http://www.violencestudy.org/r229>

Virginia Child Protection Newsletter (1998) Chronic Child Neglect. *Virginia Child Protection Newsletter* 54 (Fall).

Wolock, I & Horowitz, B (1979) Child Maltreatment and Material Deprivation *Social Services Review* 53: 175-194.

Contact information

Silvie Bovarnick
Senior Research Officer
Child Protection Research Department
Telephone: 020 7428 1186
Fax: 020 7428 1182
Email: SBovarnick@nspcc.org.uk

Weston House
42 Curtain Road
London EC2A 3NH
Tel: 020 7825 2500
www.nspcc.org.uk/inform

The National Society for the Prevention of Cruelty to Children (NSPCC) has a vision – a society where all children are loved, valued and able to fulfil their potential.

Our mission is to end cruelty to children.

The NSPCC is the UK's leading charity specialising in child protection and the prevention of cruelty to children. For over 100 years it has been protecting children from cruelty and is the only children's charity with statutory powers, enabling it to act to safeguard children at risk.

© NSPCC 2007

All rights reserved. No part of this publication may be reproduced, stored in a retrieval system or transmitted by any means, electronic, mechanical, photocopying or otherwise without the prior written permission of the copyright holder.

First published 2007 by the NSPCC.

Registered charity numbers 216401 and SC037717